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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Amanda First name D. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Rojas Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7809	

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Debtor 1 Amanda D. Rojas

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		5622 W. Hawthorne Ave. Berkeley, IL 60163	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-12543 Doc 1

Tell the Court About Your Bankruptcy Case

Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13

a pre-printed address.

District

District

District

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The Filing Fee in Installments (Official Form 103A).

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Debtor 1 Amanda D. Rojas

> The chapter of the Bankruptcy Code you are

choosing to file under

How you will pay the fee

Part 2:

Document

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When

When

When

Desc Main 4/21/17 12:57PM Case number (if known) Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Case number Case number

Case number

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

Have you filed for

bankruptcy within the last 8 years?

■ No

No.

☐ Yes.

☐ Yes.

Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Page 4 of 50 Document Case number (if known) Debtor 1 Amanda D. Rojas

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busing	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ens, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).		
	For a definition of small	No.	I am r	not filing under Chapt	er 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention
	Do you own or have any			,	
1-7.	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Amanda D. Rojas

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Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 50 Case number (if known) Debtor 1 Amanda D. Rojas Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Amanda D. Rojas Signature of Debtor 2 Amanda D. Rojas Signature of Debtor 1 Executed on April 21, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Amanda D. Rojas

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	April 21, 2017	
Signature of Attorney for Debtor		MM / DD / YYYY	
David M. Siegel Printed name			
David M. Siegel & Associates			
790 Chaddick Drive Wheeling, IL 60090			
Number, Street, City, State & ZIP Code			
Contact phone (847) 520-8100	Email address		
#06207611			
Bar number & State			

4/21/17 12:57PM

Fill in this information to identify your case:

Debtor 1

Amanda D. Rojas
First Name

Middle Name

Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,325.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	20,325.00
Pa	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	21,193.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,489.00
	Your total liabilities	\$	34,682.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	907.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,019.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	ıl, family, or

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Debtor 1 Amanda D. Rojas Document Page 9 of 50 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort 4 on Schodule E/E convethe following:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 10 of 50		4/21/17 12:57
Fill in this info	rmation to identify your case a	nd this filing:			
Debtor 1	Amanda D. Rojas				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the: NOR	THERN DISTRICT OF ILL	INOIS		
Case number					☐ Check if this is an
			_		amended filing
Official Fo	orm 106A/B				
	le A/B: Property	V			12/15
	separately list and describe items		an asset fits in more than o	one category, list the asset in	
	Be as complete and accurate as pore space is needed, attach a separestion.				
Part 1: Describe	e Each Residence, Building, Land,	or Other Real Estate You O	wn or Have an Interest In		
1. Do you own or	r have any legal or equitable intere	st in any residence, building	a, land, or similar property?		
_	, , ,	,			
No. Go to Pa					
☐ Yes. Where	e is the property?				
Part 2: Describe	e Your Vehicles				
□ No ■ Yes					
2.4 Make	Nissan	Who has an interest in t	ha mramantus? Ol	Do not deduct secured of	claims or exemptions. Put
3.1 Make: Model:	Sentra SV	Who has an interest in the	ne property? Check one		ed claims on Schedule D: ims Secured by Property.
Year:	2017	■ Debtor 1 only □ Debtor 2 only			, , ,
Approxima	ate mileage: 3,940k	Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
Other info		At least one of the deb	tors and another		
	f America d Lien \$21,193	Check if this is commo	nunity property	\$18,725.00	\$18,725.00
Examples: Bo ■ No □ Yes 5 Add the doll pages you here.	lar value of the portion you own ave attached for Part 2. Write	atercraft, fishing vessels, s on for all of your entries of that number here	nowmobiles, motorcycle a	occessories	\$18,725.00
Do you own or	have any legal or equitable in	terest in any or the follo	ang tems:		portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Amanda D. Rojas		Document	Page 11 of 50 Case number (if known)	
■ Yes.	Describe				
	Housel	hold Goods	s and Furniture		\$800.00
□No				pment; computers, printers, scanners; music o	collections; electronic devices
	TV & E	lectronics			\$300.00
Exampl ■ No	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coin	, or baseball card collections;
Exampl	nent for sports and hobbie les: Sports, photographic, e. musical instruments	es xercise, and	other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns Describe	s, ammunitio	n, and related equipmer	ut	
□ No	es ples: Everyday clothes, furs Describe	, leather coa	ts, designer wear, shoes	s, accessories	
	Norma	I Apparel			\$500.00
■ No □ Yes.	ples: Everyday jewelry, cost Describe	tume jewelry,	engagement rings, wed	lding rings, heirloom jewelry, watches, gems, q	gold, silver
Exam _l ■ No	Irm animals ples: Dogs, cats, birds, hors Describe	ses			
■ No	ther personal and househo	_	u did not already list, i	including any health aids you did not list	
	the dollar value of all of yo art 3. Write that number h		•	nny entries for pages you have attached	\$1,600.00
Part 4: De	escribe Your Financial Assets				
Do you ov	wn or have any legal or eq	juitable intei	est in any of the follow	ving?	Current value of the portion you own? Do not deduct secured

claims or exemptions.

Case 17-12543 Doc 1 Filed 04/21/17 Entered 04/21/17 13:00:05 Desc Main Document Page 12 of 50 Debtor 1 Case number (if known) Amanda D. Rojas 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking Account** Bank of America \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

 $\hfill \square$ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Amanda D. Rojas 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

37. Do you own or have any legal or equitable interest in any business-related property?

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

for Part 4. Write that number here......

No. Go to Part 6.

☐ Yes. Go to line 38.

\$0.00

		Case 17-12543	Doc 1	Filed 04/21/17 Document	Entered 04/ Page 14 of 5	21/17 13:00:05 0_	Desc Main	4/21/17 12:57PN
Debt	tor 1	Amanda D. Rojas				Case number (if known)		
Part		cribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest I	n.		
16. C	Do you	own or have any legal or	equitable in	terest in any farm- or	commercial fishing-	related property?		
	■ No. (Go to Part 7.						
	☐ Yes.	Go to line 47.						
Part	7:	Describe All Property You	Own or Have a	an Interest in That You Did	l Not List Above			
		have other property of ar						
	<i>Examp</i> I No	les: Season tickets, country	/ club membe	ersnip				
		Cive appoific information						
_	i res. c	Give specific information						
54.	Add th	ne dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here			\$0.00
Part	8:	List the Totals of Each Part o	of this Form					
55.	Part 1	: Total real estate, line 2						\$0.00
56.	Part 2	: Total vehicles, line 5			\$18,725.00			
57.	Part 3	: Total personal and hous	sehold items	s, line 15	\$1,600.00			
58.	Part 4	: Total financial assets, li	ne 36		\$0.00			
59.	Part 5	: Total business-related p	property, line	e 45	\$0.00			
60.	Part 6	: Total farm- and fishing-	related prop	erty, line 52	\$0.00			
61	Part 7	· Total other property not	listed line	54 +	00 n2			

\$20,325.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$20,325.00

\$20,325.00

Cas	se 17-12543 [Doc 1 Filed 04		04/21/17 13:00:05 5.50	Desc Main	4/21/17 12:57PM
Fill in this inform	nation to identify your	case:				
Debtor 1	Amanda D. Rojas	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	nkruptcy Court for the:	NORTHERN DISTRI				
Case number(if known)					☐ Check if this amended filir	
Official For	m 106C					
		operty You	Claim as Exe	empt		4/16
Schedule Be as complete and the property you lis	e C: The Product and accurate as possible. Sted on Schedule A/B: Ad attach to this page as	If two married people a	re filing together, both are e 06A/B) as your source, list Additional Page as necessar	equally responsible for supp the property that you claim	as exempt. If more s	ation. Using space is
Be as complete and the property you list needed, fill out and case number (if known for each item of properties dollar among applicable statements and paper in the properties of the property you list needed, fill out and case number (if known the property you list needed, fill out and case number (if known the property you list needed, fill out and case number (if known the properties of	e C: The Product accurate as possible. Sted on Schedule A/B: It attach to this page as own). property you claim as a nount as exempt. Alter attutory limit. Some exemptimited in dollar amount.	If two married people a Property (Official Form 1 many copies of Part 2: exempt, you must spernatively, you may claiemptions—such as thunt. However, if you cl	re filing together, both are e 06A/B) as your source, list	equally responsible for supp the property that you claim ry. On the top of any addition emption you claim. One we e of the property being ex to receive certain benefits of fair market value under	as exempt. If more sonal pages, write your ay of doing so is to tempted up to the as, and tax-exempter a law that limits	ation. Using space is ur name and o state a amount of retirement the
Be as complete and the property you list needed, fill out and case number (if known for each item of properties of properties of the applicable states of the applicable st	e C: The Product accurate as possible. Sted on Schedule A/B: If a attach to this page as own). property you claim as a accurate a exempt. Alternatutory limit. Some exemptimited in dollar amount accurate accurate and accurate ac	If two married people a Property (Official Form 1 many copies of Part 2: A exempt, you must spenatively, you may clai emptions—such as thunt. However, if you claid and the value of the part of the p	re filing together, both are e 06A/B) as your source, list and additional Page as necessated the amount of the exemption the full fair market values for health aids, rights aim an exemption of 100%	equally responsible for supp the property that you claim ry. On the top of any addition emption you claim. One we e of the property being ex to receive certain benefits of fair market value under	as exempt. If more sonal pages, write your ay of doing so is to tempted up to the as, and tax-exempter a law that limits	ation. Using space is ur name and o state a amount of retirement the
Be as complete and the property you lis needed, fill out and case number (if known for each item of pspecific dollar amany applicable stafunds—may be unexemption to a pat to the applicable stafunds—Item of pspecific dollar amany applicable stafunds—may be unexemption to a pat to the applicable stafunds—Item of part 1: Identify	d accurate as possible. Sted on Schedule A/B: A dattach to this page as own). property you claim as nount as exempt. Alter atutory limit. Some exemptimited in dollar amount atutory amount. Sted on Schedule A/B: A dattach to this page as own).	If two married people a Property (Official Form 1 many copies of Part 2: A exempt, you must spernatively, you may clai emptions—such as thunt. However, if you clat and the value of the paim as Exempt	re filing together, both are e 06A/B) as your source, list and additional Page as necessated the amount of the exemption the full fair market values for health aids, rights aim an exemption of 100%	equally responsible for supp the property that you claim a ry. On the top of any addition emption you claim. One we se of the property being ex to receive certain benefits of fair market value under exceed that amount, your	as exempt. If more sonal pages, write your ay of doing so is to tempted up to the as, and tax-exempter a law that limits	ation. Using space is ur name and o state a amount of retirement the

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2017 Nissan Sentra SV 3,940k miles Bank of America	\$18,725.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
Secured Lien \$21,193 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Goods and Furniture Line from Schedule A/B: 6.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line Hotti Schedule A/D. V.1			100% of fair market value, up to any applicable statutory limit	
TV & Electronics Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/D. 1.1			100% of fair market value, up to any applicable statutory limit	
Normal Apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Line Holli Goredale 742. TTT			100% of fair market value, up to any applicable statutory limit	
Checking Account: Bank of America Line from Schedule A/B: 17.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)
Line from Goriodale PVD. 1111			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Amanda D. Rojas

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

PO Box 45144 Jacksonville, Number, Street, City, S Who owes the debt? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det Check if this claim recommunity debt	FL 32232 State & Zip Code Check one.	As of the date you file, the claim apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (such car loan) Statutory lien (such as tax lien Judgment lien from a lawsuit Other (including a right to offset	ply. n as mortgage or sec , mechanic's lien)	ured Money Security		
Jacksonville, Number, Street, City, S Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 At least one of the det Check if this claim re	FL 32232 State & Zip Code Check one.	As of the date you file, the clain apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (such car loan) Statutory lien (such as tax lien Judgment lien from a lawsuit	ply. n as mortgage or sec , mechanic's lien)			
Jacksonville, Number, Street, City, S Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the det	FL 32232 State & Zip Code Check one.	As of the date you file, the clain apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (such car loan) Statutory lien (such as tax lien Judgment lien from a lawsuit	ply. n as mortgage or sec , mechanic's lien)			
Jacksonville, Number, Street, City, S Who owes the debt? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	FL 32232 State & Zip Code Check one.	As of the date you file, the clain apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (sucl car loan) Statutory lien (such as tax lien	ply. n as mortgage or sec , mechanic's lien)	ured		
Jacksonville, Number, Street, City, S Who owes the debt? O Debtor 1 only Debtor 2 only	FL 32232 State & Zip Code Check one.	As of the date you file, the clain apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (sucl	ply.	ured		
Jacksonville, Number, Street, City, S Who owes the debt? C	FL 32232 State & Zip Code	As of the date you file, the clain apply. Contingent Unliquidated Disputed Nature of lien. Check all that ap An agreement you made (sucl	ply.	ured		
Jacksonville, Number, Street, City, S	FL 32232 State & Zip Code	As of the date you file, the clain apply. Contingent Unliquidated Disputed				
Jacksonville,	FL 32232	As of the date you file, the clain apply. Contingent Unliquidated	n is: Check all that			
Jacksonville,	FL 32232	As of the date you file, the claim apply. Contingent	n is: Check all that			
		As of the date you file, the claim apply.	n is: Check all that			
PO Box 45144		As of the date you file, the clain	n is: Check all that			
			Į.			
		Bank of America Secured Lien \$21,193				
Creditor's Name		2017 Nissan Sentra SV 3	,940k miles	· ,		
2.1 Bank of Ameri	ica	Describe the property that secu	res the claim:	value of collateral. \$21,193.00	claim \$18,725.00	If any \$2,468.0 (
		cal order according to the creditor's		Do not deduct the	that supports this	portion
		more than one secured claim, list the aparticular claim, list the other cre		Amount of claim	Value of collateral	Unsecured
Part 1: List All Sec	ured Claims			Column A	Column B	Column C
Yes. Fill in all of	f the information	below.				
_		his form to the court with your o	ther schedules. Yo	ou have nothing else t	o report on this form.	
. Do any creditors have			de anna ale a 1. 1			
number (if known).	alaima a constitui					
s needed, copy the Addi		If two married people are filing to out, number the entries, and attac				
				<u> </u>	<u> </u>	
		Who Have Claim	s Secureo	l by Propert	v	12/15
Official Form 10)6D					
					amen	ded filing
(if known)						c if this is an
Case number						
United States Bankrup	tcy Court for the	NORTHERN DISTRICT OF	FILLINOIS			
(Spouse if, filing) Fir	st Name	Middle Name	Last Name			
Debtor 2						
• •	manda D. Roja st Name	Middle Name	Last Name			
Debtor 1 A	,,,,					
	n to identify you	Document ir case:	Page 17			

Add the dollar value of your entries in Column A on this page. Write that number here: \$21,193.00 If this is the last page of your form, add the dollar value totals from all pages. \$21,193.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	Cas	se 17-12543		iled 04/21/1		ed 04/21/17 13:00:0	05 Des	sc Main	4/21/17 12:57PM
Fill in	this informa	ation to identify you		Document	Page 18	3 01 50			
Debto									
Debio	1 1	Amanda D. Roja First Name	Middle N	lame	Last Name				
Debto									
(Spouse	e if, filing)	First Name	Middle N	lame	Last Name				
United	d States Ban	kruptcy Court for the:	NORTHERI	N DISTRICT OF I	LLINOIS				
Case	number								
(if know				_				heck if this	is an
							а	mended filir	ng
Offic	ial Form	106E/E							
		F: Creditors	Who Have	Unsecure	d Claims			12	2/15
						Part 2 for creditors with NONP	RIORITY clai		
Schedu left. Atta name a	lle D: Creditor ach the Conti nd case numl	rs Who Have Claims S nuation Page to this p ber (if known).	ecured by Proper age. If you have	rty. If more space i no information to r	s needed, copy t	any creditors with partially se he Part you need, fill it out, n lo not file that Part. On the top	umber the en	tries in the b	oxes on the
		of Your PRIORITY I							
_		s have priority unsecu	red ciaims again	st you?					
	No. Go to Pa Yes.	π 2.							
Part 2		of Your NONPRIOR	ITY Unsecured	l Claims					
		s have nonpriority uns							
	· ·	nothing to report in this	•	•	th your other sche	dules			
		, nothing to report in this	part. Odbriit tiilo	Torrito the court wil	ur your ource some	duics.			
	Yes.								
un: tha	secured claim	, list the creditor separa	tely for each claim	. For each claim list	ed, identify what ty	holds each claim. If a creditor ype of claim it is. Do not list clair three nonpriority unsecured clair	ms already ind	luded in Part	1. If more
								Total claim	ı
4.1		gical Assistants (Creditor's Name	Group	Last 4 digits of a	ccount number	1805			\$54.00
	РО ВОХ			When was the de	bt incurred?			_	
		ok, IL 60522-5082 eet City State Zlp Code		As of the date vo	u file. the claim i	s: Check all that apply			
		ed the debt? Check on	e.	, ,	,	or oncon all that apply			
	Debtor 1	only		☐ Contingent					
	Debtor 2	only		☐ Unliquidated					
	Debtor 1	and Debtor 2 only		☐ Disputed					
	☐ At least	one of the debtors and	another	Type of NONPRIC	ORITY unsecured	l claim:			
		f this claim is for a co	mmunity	☐ Student loans					
	debt	subject to offset?		Obligations aris		ration agreement or divorce that	t you did not		
	No	. cabjoor to onsorr				g plans, and other similar debts			
	☐ Yes			Other. Specify	•	5,, a 30010			
	03			 Other, Specify 					

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Associate Pathology 0620 \$28.00 4.2 Last 4 digits of account number Consultants-Elm Nonpriority Creditor's Name PO Box 3680 When was the debt incurred? Peoria, IL 61612-3680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Medical Other. Specify 4.3 **Bank of America** Last 4 digits of account number \$4,146.00 2302 Nonpriority Creditor's Name Opened 11/16 Last Active Po Box 45144 2/06/17 When was the debt incurred? Jacksonville, FL 32232 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts **Automobile Deficiency** Other. Specify ☐ Yes 2016 Nissan Sentra 4.4 Comenity Bank/vctrssec Last 4 digits of account number 2975 \$153.00 Nonpriority Creditor's Name Opened 02/17 Last Active Po Box 182789 When was the debt incurred? 2/13/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify

Debtor 1 Amanda D. Rojas

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Document Page 20 of 50 Debtor 1 Amanda D. Rojas Case number (if know) 4.5 \$52.00 Dupage Immediate Care, Ltd Last 4 digits of account number 5416 Nonpriority Creditor's Name 1S210 Summit Ave When was the debt incurred? Oakbrook Terrace, IL 60181-3933 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.6 **DuPage Medical Group** Last 4 digits of account number 3468 \$10.00 Nonpriority Creditor's Name 15921 Collections Center Drive When was the debt incurred? Chicago, IL 60693-0159 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other, Specify **Elmhurst Emerg Med Servs** 4.7 Last 4 digits of account number 0859 \$48.00 Nonpriority Creditor's Name 200 Berteau Ave When was the debt incurred? Elmhurst, IL 60126 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

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Debtor 1 Amanda D. Rojas

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4.8	Elmhurst Memorial Healthcare	Last 4 digits of account number 5660	\$260.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	27535 Network Place Chicago, IL 60673-1258	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.9	Elmhurst Memorial Healthcare	Last 4 digits of account number 4843	\$58.00
	Nonpriority Creditor's Name PO Box 4052	When was the debt incurred?	
	Carol Stream, IL 60197-4052	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1	Elmhurst Radiologists, SC	Last 4 digits of account number 2851	\$32.00
<i></i>	Nonpriority Creditor's Name		
	PO Box 1035	When was the debt incurred?	
	Bedford Park, IL 60499-1035	As of the data you file the claim is Check all that apply	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	

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Debtor 1 Amanda D. Rojas 4.1 **Healthy Driven Edward-Elmhurst** 0122 \$216.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 140250 When was the debt incurred? **Toledo, OH 43614** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 **Healthy Driven Edward-Elmhurst** 3336 \$68.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 140250 When was the debt incurred? **Toledo, OH 43614** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical ☐ Yes 4.1 **Kia Motors Finance** 4043 \$8,201,00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/16 Last Active 4000 Macarthur Blvd Ste When was the debt incurred? 1/27/17 Newport Beach, CA 92660 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Automobile Deficiency** ☐ Yes Other. Specify 2016 Kia Soul

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Desc Main

Case number (if know) Debtor 1 Amanda D. Rojas 4.1 Spine & Sports Physiatrists, SC 6024 \$14.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 52 When was the debt incurred? Elmhurst, IL 60126-2748 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.1 Webbank/fingerhut 0803 \$149.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/16 Last Active 6250 Ridgewood Road When was the debt incurred? 3/01/17 Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **ABC Credit & Recovery Service** ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.14 of (Check one): PO Box 3722 Part 2: Creditors with Nonpriority Unsecured Claims Lisle, IL 60532 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 0.00 Total claims Taxes and certain other debts you owe the government from Part 1 6b. 0.00 Claims for death or personal injury while you were intoxicated 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00

Total Priority. Add lines 6a through 6d.

0.00

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				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 13,489.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 13,489.00

Debtor 1 Amanda D. Rojas

		DOCUME	<u>III Paue /5 0150</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Amanda D. Rojas	3		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
					_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	INGILIE				
	Number	Street			_
					<u> </u>
	City		State	ZIP Code	

	0000 17 12040 1	Docume	nt Page 26 c	of 50	4/21/17 12:57PM
Fill in this	information to identify your	case:			
Debtor 1	Amanda D. Rojas	•			
5	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Cod	ebtors			12/15
5011C	idic II. Todi oca	CDtOIS			12/13
our name	and number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question.			ıny Additional Pages, write
■ No					
☐ Yes	S				
	hin the last 8 years, have you na, California, Idaho, Louisiana				es and territories include
	Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form out Co	e 2 again as a codebtor only i 106D), Schedule E/F (Officia olumn 2.	f that person is a guarant	tor or cosigner. Make	sure you have listed the cruicG). Use Schedule D, Sche	h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor Check all schedules tha	r to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
=	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	

State

City

ZIP Code

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Fill	in this information to identify	your case:							
Del	otor 1 Amano	la D. Rojas			_				
	otor 2 				_				
Uni	ted States Bankruptcy Court	for the: NORTHERN DISTRIC	CT OF ILLINOIS						
(If kr	se number fficial Form 106l		-			13 income a	nt showi	ing postpetition ch following date:	apter
	chedule I: Your	Income				MM / DD/ Y	YYY		12/15
sup spo atta	plying correct information. use. If you are separated ar	s possible. If two married peo If you are married and not fili nd your spouse is not filing w form. On the top of any additi ment	ng jointly, and your sp ith you, do not include	oouse i e infori	is liv mati	ing with you, inclu on about your spo	ıde info use. If n	rmation about yo	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-	filing spouse	
	If you have more than one attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed			☐ Emplo	-		
	Include part-time, seasonal self-employed work.	Occupation , or Employer's name	Package Handler UPS						
	Occupation may include stu or homemaker, if it applies.		UPS 1 Way Willow Springs, I	L 605	25				
Dar	t 2: Give Details Abo	How long employed t	here? 13 Years	i					_
E sti spou	mate monthly income as of use unless you are separated	the date you file this form. If	, , , , , , , , , , , , , , , , , , , ,					•	Ū
	u or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, coneet to this form.	ombine the information	for all e	emple	oyers for that perso	n on the	lines below. If you	ı need
						For Debtor 1		ebtor 2 or iling spouse	
2.	, ,	s, salary, and commissions (but nthly, calculate what the monthly	1 - 7 -	2.	\$	1,540.00	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$ _	N/A	

1,540.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Amanda D. Rojas		Case	number (<i>if known</i>)				
				For	Debtor 1		or Debtor		
	Con	y line 4 here	4.	\$	1,540.00	n c	on-filing s	spouse N/A	
	COP	y line 4 here	••	Ψ_	1,040.00	Ψ.			
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	339.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans Insurance	5d.	\$_	0.00	\$		N/A	
	5e. 5f.	Domestic support obligations	5e. 5f.	\$ \$	239.00	\$		N/A N/A	
	5g.	Union dues	5g.	\$ -	55.00	\$		N/A	
	5h.	Other deductions. Specify:	5h.⊣	· : —	0.00			N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	633.00	\$		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	907.00	\$		N/A	
8.			• • •	Ψ_	307.00	Ψ.			
5.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$-	0.00	\$		N/A	
	8e.	Social Security	8e.	\$	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		Ф.		ф.			
	0~	Specify:	_ 8f. _ o∝	\$_	0.00	\$		N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.⊣	\$_ - \$	0.00	\$ + \$		N/A N/A	
	OII.		_ 011.1		0.00	` —			7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/A	
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		907.00 + \$		N/A	= \$	907.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο. Ψ						307.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depen	,	,	•	Schedule	∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies						\$	907.00
13.	Dov	you expect an increase or decrease within the year after you file this form?	?					Combine monthly	
	■	No. Yes Explain:							

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	in this information to identify your case:				
Deb	Amanda D. Rojas			eck if this is: An amended filing	
	otor 2ouse, if filing)			•	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			MM / DD / YYYY	
	se number				
O	fficial Form 106J				
Be info	chedule J: Your Expenses as complete and accurate as possible. If two married people are fi formation. If more space is needed, attach another sheet to this form the firm the				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for</i>	Separate Household	of Del	otor 2.	
2.	Do you have dependents? ☐ No				
		Dependent's relationsl Debtor 1 or Debtor 2	nip to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Son		3	□ No ■ Yes □ No
	-				☐ Yes ☐ No ☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supplen blicable date.				
the	lude expenses paid for with non-cash government assistance if your value of such assistance and have included it on <i>Schedule I: You</i> n ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.	ide first mortgage	4.	\$	400.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	· ———	0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. 4d.	·	0.00
5.	Additional mortgage payments for your residence, such as home	equity loans	5.		0.00

Debtor 1	Amanda D. Rojas	Case num	ber (if known)	
6. Uti l	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	240.00
6d.	Other. Specify:	6d.	\$	0.00
. Foo	od and housekeeping supplies		\$	350.00
. Chi	Idcare and children's education costs	8.	\$	0.00
. Clo	thing, laundry, and dry cleaning	9.	\$	0.00
	sonal care products and services	10.		0.00
	dical and dental expenses	11.	\$	430.00
2. Tra	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	0.00
3. En t	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Ch	aritable contributions and religious donations	14.	\$	0.00
5. Ins	urance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	·	0.00
15b	. Health insurance	15b.	\$	0.00
150	. Vehicle insurance	15c.	\$	240.00
150	. Other insurance. Specify:	15d.	\$	0.00
6. Ta x	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	allment or lease payments:			
	. Car payments for Vehicle 1	17a.	\$	359.00
	Car payments for Vehicle 2	17b.	\$	0.00
170	. Other. Specify:	17c.	\$	0.00
170	. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		•	0.00
ded	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· -	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	· ———	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.		0.00
l. Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2,019.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,013.00
	Add line 22a and 22b. The result is your monthly expenses.		\$	2.040.00
220	. Add line 22a and 22b. The result is your monthly expenses.		Φ	2,019.00
3. Ca l	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	907.00
	. Copy your monthly expenses from line 22c above.	23b.		2,019.00
				_,-,
230	. Subtract your monthly expenses from your monthly income.			4 445 5-
	The result is your monthly net income.	23c.	\$	-1,112.00
For mod	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your lification to the terms of your mortgage? No.	u file this mortgage	s form? payment to increase	or decrease because of a
	Voc. Evolain here:			

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Fill in this in	formation to identify your	•				
	formation to identify your	case:				
Debtor 1	Amanda D. Rojas		Last Name			
Debtor 2	FIRST Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS			
Case number	r					
(if known)					Check if this is an amended filing	
	orm 106Dec					
Declar	ation About a	ın Individua	ıl Debtor's S	chedules	12/15	
years, or botl	h. 18 U.S.C. §§ 152, 1341, 1		mapley case can resul	t III IIII 65 up 10 4200,00	0, or imprisonment for up to 20	
Did you	ı pay or agree to pay some	one who is NOT an att	orney to help you fill out	bankruptcy forms?		
■ No						
☐ Ye	s. Name of person	Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
	enalty of perjury, I declare y are true and correct.	that I have read the su	mmary and schedules fi	led with this declaratio	on and	
X /s/ A	Amanda D. Rojas		X			
Am	anda D. Rojas nature of Debtor 1		Signature	of Debtor 2		

Official Form 106Dec

Date

Date April 21, 2017

	l in this inform	otion to identify you				
_		ation to identify you				
ре	btor 1	Amanda D. Roja First Name	Middle Name	Last Name		
	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	NORTHERN DISTRICT			
UII	illeu States Dan	kruptcy Court for the.	NORTHERN DISTRICT	OF ILLINOIS		
	se number				_	Check if this is an mended filing
	fficial For atement		Affairs for Indivi	duals Filing for B	ankruptcy	4/16
info nur	ormation. If months in the mon	ore space is needed,). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Pa			rital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Mal	ke sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part e together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,620.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Amanda D. Rojas Description Page 33 of 50 Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app	oly.	Gross income (before deductions and exclusions)
	or last cale anuary 1 to	ndar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, comm bonuses, tips	issions,	
				☐ Operating a business		☐ Operating a bu	ısiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$21,243.00	☐ Wages, comm bonuses, tips	issions,	
				☐ Operating a business		☐ Operating a bu	ısiness	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint cas the gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separa	rest; dividends; money collect you received together, list it	cted from lawsuits; ro only once under Deb	yalties; and g tor 1.	
				Dobton 4		Dobtor 2		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incor Describe below.		Gross income (before deductions and exclusions)
Pa	art 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither Dindividual During the No. Yes	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	Imer debts. Consumer debtld purpose." d you pay any creditor a total d a total of \$6,425* or more ats for domestic support oblinis bankruptcy case.	al of \$6,425* or more in one or more paym gations, such as child	? ents and the I support and	total amount you
	■ Vaa			on 4/01/19 and every 3 year		or after the date of a	iajustment.	
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?		
		■ No.	Go to line 7					
		□ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you	Was this pay	yment for

Debtor 1 Amanda D. Rojas

Document Page 34 of 50
Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	NoYes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos	<i>.</i>	ments or transfer a	iny property o	n account of a d	lebt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		r this payment ditor's name	
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.						
	Case title	Nature of the case	Court or agency		Status of the	he case	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		rty repossessed, f	oreclosed, ga	rnished, attache		
	Creditor Name and Address	Describe the Property		Da	ate	Value of the property	
		Explain what happened				property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fin	nancial institu	tion, set off any	amounts from your	
	Creditor Name and Address	Describe the action the	creditor took		ate action was ken	Amount	
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes		rty in the possessi			efit of creditors, a	
	rt 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	with a total value	of more than	\$600 per person	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts			ates you gave e gifts	Value	
	Person to Whom You Gave the Gift and Address:						

Case 17-12543 Doc 1 Filed 04/21/17 Entered 04/21/17 13:00:05 Desc Main Page 35 of 50 Case number (if known) Document Debtor 1 Amanda D. Rojas 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Date of your Describe any insurance coverage for the loss Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 2016 Nissan Sentra 12/16 \$4,146.00 **Totaled in Accident** 9/16 2016 Kia Soul \$8,201.00 **Totaled in Accident** Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred or transfer was payment Address **Email or website address** made Person Who Made the Payment, if Not You **Attorney Fees** 3/13/17 \$1.015.00 David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who Do not include any payment or transfer that you listed on line 16. Γ Description and value of any property Amount of Date payment

promised to help you deal with your creditors or to make payments to your creditors?

No						
Yes. Fill in the details.						
Person Who Was Paid Address						

transferred

or transfer was made

payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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ase number (if known)

Debtor 1 Amanda D. Rojas

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Describe the contents Name of Storage Facility Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Case number (if known) Document

Debtor 1 Amanda D. Rojas

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?						
	☐ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any env	/ironm	ental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the case	Status of the case		
Par	t 11: Give Details About Your Business or Co	onnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have a	ny of t	he following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
		Describe the nature of the business			umber or ITIN.		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed			
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement	to any	one about your business? Includ	de all financial		
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

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Debtor 1 Amanda D. Rojas Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Amanda D. Rojas Signature of Debtor 2 Amanda D. Rojas Signature of Debtor 1 Date April 21, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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	,	Jocument 1 age 33 of 30	
			I
Fill in this inforr	nation to identify your case:		
Debtor 1	Amanda D. Rojas First Name Middle Na	ime Last Name	
Debtor 2	First Name Middle Na	ine Last Name	
(Spouse if, filing)	First Name Middle Na	me Last Name	
United States Ba	nkruptcy Court for the: NORTHERN	DISTRICT OF ILLINOIS	
Coop number			
Case number _		-	☐ Check if this is an
			amended filing
Official Fo	rm 108		
		dividuals Filing Under Chapt	or 7
Statemen	it of intention for in	dividuals i lillig Offder Chapt	er / 12/15
If you are an indi	vidual filing under chapter 7, you mu	ust fill out this form if:	
	e claims secured by your property, o		
■ you have leas	ed personal property and the lease h	nas not expired.	
		after you file your bankruptcy petition or by the date s ds the time for cause. You must also send copies to tl	
on the	•	us the time for cause. You must also send copies to the	ie creditors and lessors you list
If two married ne	oonle are filing together in a joint cas	e, both are equally responsible for supplying correct i	information Both debtors must
	d date the form.	e, both are equally responsible for supplying correct	mormation. Both debtors must
Be as complete a	and accurate as possible. If more spa	ace is needed, attach a separate sheet to this form. Or	the top of any additional pages.
	our name and case number (if know		
Part 1: List Yo	our Creditors Who Have Secured Cla	ims	
1. For any credite information be	•	ule D: Creditors Who Have Claims Secured by Proper	y (Official Form 106D), fill in the
	editor and the property that is collatera		
		secures a debt?	as exempt on Schedule C?
_	ank of America	Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of	2017 Nissan Sentra SV 3,940k	Retain the property and enter into a Reaffirmation Agreement.	– Yes
property	miles	☐ Retain the property and [explain]:	
securing debt:	Bank of America Secured Lien \$21,193		
	Secured Lien \$21,193		
	our Unexpired Personal Property Lea		
		sted in Schedule G: Executory Contracts and Unexpires. Unexpired leases are leases that are still in effect; t	
		se if the trustee does not assume it. 11 U.S.C. § 365(p)	
Describe your u	nexpired personal property leases		Will the lease be assumed?
Describe your u	nexpired personal property leases		will the lease be assumed:
Lessor's name:			□ No
Description of lea Property:	ased		□ Vaa
			☐ Yes
Lessor's name:			□ No
Description of lea	ased		

Official Form 108

Property:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Yes

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Debtor 1 Amanda D. Rojas Case number (if known) Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal

property that is subject to an unexpired lease.

X /s/ Amanda D. Rojas Amanda D. Rojas

Signature of Debtor 1

Date

April 21, 2017

Signature of Debtor 2

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-12543 Doc 1 Filed 04/21/17 Entered 04/21/17 13:00:05 Desc Main Document Page 45 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

			Trofficial District of Inmois			
In r	e Amanda D. R	Rojas	D. 1()	Case No.		
			Debtor(s)	Chapter	7	
	DIS	SCLOSURE OF CO	OMPENSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	compensation paid	to me within one year before	r. P. 2016(b), I certify that I am the attorne re the filing of the petition in bankruptcy, of mplation of or in connection with the bank	or agreed to be paid	to me, for services rendered or	to
	For legal servi	ces, I have agreed to accept	t	\$	1,015.00	
			received		1,015.00	
					0.00	
2.	The source of the co	ompensation paid to me wa	as:			
	Debtor	☐ Other (specify):				
3.	The source of comp	pensation to be paid to me is	s:			
	Debtor	☐ Other (specify):				
4.	■ I have not agree	ed to share the above-disclo	osed compensation with any other person u	inless they are mem	bers and associates of my law f	irm.
			compensation with a person or persons who of the names of the people sharing in the o			A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	b. Preparation andc. Representation ofd. [Other provision Negotiation agreeme	filing of any petition, scheoof the debtor at the meeting as as needed] ions with secured credi	and rendering advice to the debtor in deterdules, statement of affairs and plan which is of creditors and confirmation hearing, and itors to reduce to market value; exerts needed; preparation and filing of mid goods.	may be required; d any adjourned hear mption planning;	rings thereof;	
6.	Represer		sclosed fee does not include the following n any dischargeability actions, judic proceeding.		es (except in Chapter 13	
			CERTIFICATION			
	I certify that the for bankruptcy proceedi		nent of any agreement or arrangement for p	payment to me for re	epresentation of the debtor(s) in	l
	April 21, 2017		/s/ David M. Siege	l		
1	Date		David M. Siegel			
			Signature of Attorney David M. Siegel &			
			790 Chaddick Driv	re		
			Wheeling, IL 6009 (847) 520-8100	0		

Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were
 not originally provided by the Client. The Client has the full responsibility to ensure that all
 creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

H.	The FLAT FEE for	representation	n in this matter will be \$350
	_		reement in its entirety, understands it fully, has had an ent, is satisfied with it, and accepts it in its entirety.
Date:	3-9-17		Signed: man le Moran
			Print: PHAWOA ROLD
Date:			Signed:
			Print:
Date:	3-9-17	Signed:	M/
		Attor	ney for David M. Siegel

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United States Bankruptcy Court Northern District of Illinois

		Northern District of Inmois		
In re	Amanda D. Rojas		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	15
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	itors is true and correct to	the best of my
Date:	April 21, 2017	/s/ Amanda D. Rojas Amanda D. Rojas Signature of Debtor		

ABC Credit & Recovery Service PO Box 3722 Lisle, IL 60532

ACE Surgical Assistants Group PO BOX 5082 Oak Brook, IL 60522-5082

Associate Pathology Consultants-Elm PO Box 3680 Peoria, IL 61612-3680

Bank of America PO Box 45144 Jacksonville, FL 32232

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Dupage Immediate Care, Ltd 1S210 Summit Ave Oakbrook Terrace, IL 60181-3933

DuPage Medical Group 15921 Collections Center Drive Chicago, IL 60693-0159

Elmhurst Emerg Med Servs 200 Berteau Ave Elmhurst, IL 60126

Elmhurst Memorial Healthcare 27535 Network Place Chicago, IL 60673-1258

Elmhurst Memorial Healthcare PO Box 4052 Carol Stream, IL 60197-4052

Elmhurst Radiologists, SC PO Box 1035 Bedford Park, IL 60499-1035

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